

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

SYNERGY PAC

ADDRESS (number and street)

6849 Old Dominion Drive

Suite 222

☐Check if different  
than previously  
reported. (ACC)

McLean

VA

22101

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00409623

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☒

Special (12G)

Election on

10

16

2007

in the  
State of

MA

(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2007

through

09

26

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Leslie J. Kerman

Signature of Treasurer

Electronically Filed by Leslie J. Kerman

Date

10

01

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
SYNERGY PAC

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 0 | 1 | 2 | 0 | 0 | 7 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 9 | 2 | 6 | 2 | 0 | 0 | 7 |

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1 <span>2007</span>   |                         | 30504.68                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....   | 15090.27                |                                   |
| (c) Total Receipts (from Line 19) .....  | 57637.45                | 171637.45                         |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....             | 72727.72                | 202142.13                         |
| 7. Total Disbursements (from Line 31) .....  | 22136.21                | 151550.62                         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 50591.51                | 50591.51                          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name  
SYNERGY PAC

Report Covering the Period:

From:

M M  
0 7D D  
0 1Y Y Y Y  
2 0 0 7

To:

M M  
0 9D D  
2 6Y Y Y Y  
2 0 0 7

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 7000.00                       | 31000.00                          |
| (i) Itemized (use Schedule A) .....  | 0.00                          | 0.00                              |
| (ii) Unitemized .....  | 7000.00                       | 31000.00                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 50500.00                      | 140500.00                         |
| (c) Other Political Committees (such as PACs) .....  | 57500.00                      | 171500.00                         |
| (d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....    |                               |                                   |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 137.45                        | 137.45                            |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 57637.45                      | 171637.45                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 57637.45                      | 171637.45                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS   |  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:   |  |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                      |  | 0.00                          | 0.00                              |
| (i) Federal Share.....  |  |                               |                                   |
| (ii) Non-Federal Share.....   |  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures.....   |  | 15136.21                      | 67050.62                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                           |  | 15136.21                      | 67050.62                          |
| 22. Transfers to Affiliated/Other Party Committees.....   |  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....          |  | 7000.00                       | 84500.00                          |
| 24. Independent Expenditure (use Schedule E) .....  |  | 0.00                          | 0.00                              |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....  |  | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....   |  | 0.00                          | 0.00                              |
| 27. Loans Made.....   |  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:  |  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                   |  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....  |  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....   |  | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                            |  | 0.00                          | 0.00                              |
| 29. Other Disbursements.....  |  | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C 431(20))   |  |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)   |  |                               |                                   |
| (i) Federal Share .....   |  | 0.00                          | 0.00                              |
| (ii) "Levin" Share .....  |  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                            |  | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....               |  | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..        |  | 22136.21                      | 151550.62                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... |  | 22136.21                      | 151550.62                         |

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 5

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 57500.00                      | 171500.00                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 57500.00                      | 171500.00                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 15136.21                      | 67050.62                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 137.45                        | 137.45                            |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 14998.76                      | 66913.17                          |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SYNERGY PAC

|   |  |                                      |   |  |
|---|--|--------------------------------------|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Charles M. Brain   |  |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 8 / 0 7 / 2 0 0 7 |  |
| Mailing Address 316 Second St., SE<br>#100  |  |                                      | <b>Transaction ID:</b> SA11A1.4988                              |  |
| City State Zip Code<br>Washington DC 20003  |  |                                      | Amount of Each Receipt this Period<br>1000.00                   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |                                      | Contribution  |  |
| Name of Employer<br>Capitol Hill Strategies, LLC  |  | Occupation<br>Legislative Consultant |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>1000.00  |   |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Marc A. Dibella  |  |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 9 / 1 1 / 2 0 0 7 |  |
| Mailing Address One Gold Street<br>Apt. 24K   |  |                                      | <b>Transaction ID:</b> SA11A1.4972                              |  |
| City State Zip Code<br>Hartford CT 06103  |  |                                      | Amount of Each Receipt this Period<br>1000.00                   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |                                      | Contribution  |  |
| Name of Employer<br>Avallone, Dibella & Associates  |  | Occupation<br>Lobbyist               |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>2000.00  |   |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mohegan Tribe  |  |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 7 / 1 8 / 2 0 0 7 |  |
| Mailing Address 5 Crow Hill Road  |  |                                      | <b>Transaction ID:</b> SA11A1.4959                              |  |
| City State Zip Code<br>Uncasville CT 06382  |  |                                      | Amount of Each Receipt this Period<br>5000.00                   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |                                      | Contribution  |  |
| Name of Employer  |  | Occupation                           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>5000.00  |   |  |

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

7000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SYNERGY PAC

Full Name (Last, First, Middle Initial)

**A.** AFL-CIO COPE POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 815 16th Street NW

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00003806

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 1 0 / 2 0 0 7

Transaction ID: SA11C.4975

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**B.** AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Mailing Address 1625 L STREET NW

City State Zip Code  
 WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00011114

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 3 / 2 0 0 7

Transaction ID: SA11C.4977

Amount of Each Receipt this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

**C.** AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 Seventh Street NW  
 Suite 700

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00106146

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 5 / 2 0 0 7

Transaction ID: SA11C.5017

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

12500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SYNERGY PAC

A. Full Name (Last, First, Middle Initial)  
CITIGROUP INC. POLITICAL ACTION COMMITTEE-FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 Pennsylvania Ave. NW #1000

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee. **C** C00008474

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 7

Transaction ID: SA11C.4966

Amount of Each Receipt this Period

2500.00

Contribution

B. Full Name (Last, First, Middle Initial)

I.B.E.W.-C.O.P.E. PAC

Mailing Address 900 Seventh St. NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 7

Transaction ID: SA11C.4963

Amount of Each Receipt this Period

5000.00

Contribution

C. Full Name (Last, First, Middle Initial)

MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 State Street

City State Zip Code  
Springfield MA 01111

FEC ID number of contributing  
federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 7

Transaction ID: SA11C.4971

Amount of Each Receipt this Period

3000.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

10500.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SYNERGY PAC

**A.** Full Name (Last, First, Middle Initial) NATIONAL ASSOCIATION OF BROADCASTERS TELEVISION AND RADIO POLITICAL ACTION COMMITTEE

Mailing Address 1771 N Street NW

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 2 6 / 2 0 0 7

Transaction ID: SA11C.4983

Amount of Each Receipt this Period

2500.00

Contribution

**B.** Full Name (Last, First, Middle Initial) NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 North Michigan Avenue

City State Zip Code  
 Chicago IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 2 6 / 2 0 0 7

Transaction ID: SA11C.4981

Amount of Each Receipt this Period

2000.00

Contribution

**C.** Full Name (Last, First, Middle Initial) NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 Madison Ave.  
 Room 1109

City State Zip Code  
 New York NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 0 7 / 2 0 0 7

Transaction ID: SA11C.4985

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

9500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 17

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SYNERGY PAC

**A.** Full Name (Last, First, Middle Initial)  
NEW YORK MERCANTILE EXCHANGE POLITICAL ACTION COMMITTEE

Mailing Address One North End Ave  
14th Floor

City State Zip Code  
New York NY 10282

FEC ID number of contributing  
federal political committee.

**C** C00230185

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 7 / 2 0 0 7

Transaction ID: SA11C.4991

Amount of Each Receipt this Period

5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
OPPENHEIMERFUNDS INC. POLITICAL ACTION COMMITTEE

Mailing Address 1295 State Street

City State Zip Code  
Springfield MA 01111

FEC ID number of contributing  
federal political committee.

**C** C00367920

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 0 / 2 0 0 7

Transaction ID: SA11C.4970

Amount of Each Receipt this Period

2000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
PRAIRIE POLITICAL ACTION COMMITTEE

Mailing Address POST OFFICE BOX 2002

City State Zip Code  
SPRINGFIELD IL 62705

FEC ID number of contributing  
federal political committee.

**C** C00347195

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 0 / 2 0 0 7

Transaction ID: SA11C.4968

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

12000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 17

(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17  |                              |   |                             |

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NAME OF COMMITTEE (In Full)

SYNERGY PAC

Full Name (Last, First, Middle Initial)  
A. UNITED PARCEL SERVICE INC. POLITICAL ACTION COMMITTEE

Mailing Address 55 Glenlake Parkway N.E.

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Atlanta | GA    | 30328    |

FEC ID number of contributing  
federal political committee.

C C00064766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 8 | / | 2 | 0 | 0 | 7 |

Transaction ID: SA11C.4961

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)  
B. WEBSTER BANK PAC - FEDERAL

Mailing Address WEBSTER PLAZA 145 BANK STREET

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| WATERBURY | CT    | 06720    |

FEC ID number of contributing  
federal political committee.

C C00321406

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 0 | / | 2 | 0 | 0 | 7 |

Transaction ID: SA11C.4965

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

6000.00

TOTAL This Period (last page this line number only) .....

50500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
SYNERGY PAC

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 297812

City Ft. Lauderdale State FL Zip Code 33329-7812

Purpose of Disbursement  
See Memo Below.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.5015

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 3 |   | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

1582.70

**B. Sonoma Restaurant**

Mailing Address 223 Pennsylvania Avenue, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC Event: Catering Charges

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.5015.0

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

1582.70

[MEMO ITEM]

**C. Lori B. LaFave**

Mailing Address 200 East Jefferson Street

City Falls Church State VA Zip Code 22046

Purpose of Disbursement  
PAC Fundraising Services: Fees

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4998

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

6000.00

SUBTOTAL of Disbursements This Page (optional) .....

7582.70

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
SYNERGY PAC

Full Name (Last, First, Middle Initial)

**A.** Priam Vineyards, LLC

Mailing Address 11 Shailor Hill Road

City Colchester State CT Zip Code 06415

Purpose of Disbursement  
PAC Event: Wine

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.5004

Date of Disbursement

/   /

Amount of Each Disbursement this Period

360.00

Full Name (Last, First, Middle Initial)

**B.** The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.  
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement  
PAC Mang't./Compliance: Fees & Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4994

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1095.92

Full Name (Last, First, Middle Initial)

**C.** The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.  
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement  
PAC Mang't./Compliance: Fees & Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4995

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1015.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2470.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
SYNERGY PAC

Full Name (Last, First, Middle Initial)

**A.** The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.  
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement  
PAC Mang't./Compliance: Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4997

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.  
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement  
PAC Mang't./Compliance: Fees & Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4996

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1283.95

Full Name (Last, First, Middle Initial)

**C.** Twenty-First Century Group

Mailing Address 434 New Jersey Avenue, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC Event: Catering Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.5001

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1750.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3533.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
SYNERGY PAC

Full Name (Last, First, Middle Initial)

**A.** Twenty-First Century Group

Mailing Address 434 New Jersey Avenue, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC Event: Catering Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4999

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

15087.57

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
**SYNERGY PAC**

Full Name (Last, First, Middle Initial)

## **A. FRIENDS OF PHIL HARE**

Mailing Address 313 17th Street  
P.O. Box 4183

City State Zip Code  
Rock Island IL 61202

Purpose of Disbursement  
Contribution

Candidate Name  
**PHILIP G HARE**

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 17

**Transaction ID: SB23.5009**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

## **B. GENE TAYLOR FOR CONGRESS COMMITTEE**

Mailing Address Post Office Box 38

City State Zip Code  
Bay St. Louis MS 39520

Purpose of Disbursement  
Contribution

Candidate Name  
**GENE MR. TAYLOR**

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 04

**Transaction ID: SB23.5014**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

## **C. LOEBSACK FOR CONGRESS**

Mailing Address PO Box 1457

City State Zip Code  
Iowa City IA 52244

Purpose of Disbursement  
Contribution

Candidate Name  
**DAVID WAYNE LOEBSACK**

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA District: 02

**Transaction ID: SB23.5006**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 17

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
SYNERGY PAC

A. Full Name (Last, First, Middle Initial)  
NIKI TSONGAS COMMITTEE, THE

Mailing Address PO BOX 1454

City State Zip Code  
LOWELL MA 01853

Purpose of Disbursement  
Contr.: Special Gen. Election: 10/16/07

Candidate Name  
NICOLA S TSONGAS

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MA District: 05

Disbursement For: 2007  
☐ Primary ☒ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.5010

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 19 / 2007

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
SESTAK FOR CONGRESS

Mailing Address P.O. Box 16

City State Zip Code  
Media PA 19063

Purpose of Disbursement  
Contribution

Candidate Name  
JOSEPH A JR. SESTAK

Office Sought: ☒ House  
☐ Senate  
☐ President

State: PA District: 7

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.5005

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 31 / 2007

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

7000.00